STD. 262 (REV 10/92) CLAIMANT'S NAME Scott Reid				SSAN OR EMPLOYEE NUMBER* DEPAR On File State					TMENT and Consumer Services Agency																		
Undersecretary CB/ID NUMBER Exempt				DIVISION OR BUREAU State and Consumer Services Agency					INDEX NUMBER																		
RESIDENCE ADDRESS On File CITY STATE ZIP CODE On File (I) MONTHYPAR (3) (4) (5)				HEADQUARTERS ADRESS 915 Capitol Mall, Suite 200 city Sacramento								LEPHONE NUMBER On File ZIP CODE 95814															
														Aug-09	9	į			O.T., L/T,	1	(A)	(B)	(C)	(D)		,,
														DATE TI	I OCATION WHERE EXPENSES WERE INCURRED	LODGING	BREAK- FAST	LUNCH	N/C, RELO, OR DINNER	INCIDEN- TALS	COST OF TRANS.	TYPE USED SC/PC	CARFARE, TOLLS, PARKING		TE CAR SE AMOUNT	BUSINESS EXPENSE	TOTAL EXPENSES FOR DAY
11-Aug	SCSA to DCA and return							pc		15	8.25		8.2														
12-Aug	SCSA to DCA and return							рс		15	8.25		8.2														
13-Aug	SCSA to DCA and return					ļ		рс		15	8.25		8.2														
18-Aug	SCSA to DCA and return							pc		15	8.25		8.2														
26-Aug	SCSA to DGS warehouse and return Court Call - San Mateo County	,						pc		16	8.80		8.8														
27-Aug	Superior Court SCSA to DGS warehouse			ļ								65.00	65.00														
28-Aug	and return			<u> </u>				рс		16	8.80		8.80														
TANALA																											
										1																	
		778																									
į																											
SL	JBTOTALS				1					92	50.60	65.00	115.60														
CC	DLUMN CODE (ACCTG. USE (ONLY)		55 (18 (5) 5 61 (5) (6) 6		11																					
	_AIM TOTAL											\$115	.60														
(11) PURPOSE OF TRIP, REMARKS AND DETAILS (Attach receipts/vouchers when required) 8/11 - Discuss Department/Agency matters 7:00am to 5:00pm																											
8/12 - Attend Board of Registered Nursing meeting									(13) PRIVATE VEHICLE LICENSE NUMBER																		
8/13 - Discuss Department/Agency matters									On file																		
	cuss Department/Agency matter paration of California Garage Sa		warehou	ıse					(14) MILEAG	e RATE CLA .55 ce n																	
8/27 - Court call fee San Mateo Superior Court									AGENCY ACCOUNTING OFFICE																		
3/2 <u>8 - Calif</u>	fornia Garage Sale - DGS ware	house						***************************************	i di	AID REVO	USE ONI VING FUND	,Y CHECK NUMBE	iR														
	RTIFY That the above is a line statement of the travel expenses if if mileage rates exceed the minimum rate, I certify that the cos ections 0750, 0751, 0752, 0753, and 0754 pertaining to vehicle	t of operating the vi	ehicle was equal																								
	NATURE		DATE		(16) SIGNATU	IRE OF OFFI	CER APPRO	VING TRAVI	EL AND PAYN	AENT		DATE															